PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10799282

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
<u></u>	OTAL OLABAC	· · · · ·	(Column 1)		(Column 2)		i .	TYPE [OR	SMALL	ENTITY
TOTAL CLAIMS			64		<u> </u>	·		RATE	FEE]	RATE	FEE
FOR .			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			6 Umir	nus 20=	. /	14	·	X\$ 9=		OR	X\$18=	792
INDEPENDENT CLAIMS			2 minus 3 = 1*			1		X43=		OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT			· 🗆		+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1567	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)		SMALL !	ENTITY	OR	SMALL !	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	,
		(Column 1)		·					•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
١ME	Independent	* .	Minus	***		= .		X43=	,	OR	X86=	
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										7	
		•					L	+145=		OR	+290=	
		A	TOTAL DDIT, FEE		OR ,	TOTAL ADDIT. FEE						
(Column 1) (Column 2) (Column 3)												• •
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=	$\neg \neg$	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	-			
. 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								أحيا	OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE	
	The "Highest Num	ber Previously Paid	i For" (Total or	Independe	nt) is the	highest number	r foun	d in the appr	opriate box	in colu	ımn 1.	